United States District Court

for the

Eastern District of Texas

APL MICROSCOPIC, LLC)))
Plaintiff(s) V.)) Civil Action No. 4:17-cv-00554
PREMIER PAIN CARE, P.A. d/b/a THE REGENERATIVE SPINE AND JOINTS INSTITUTE)))
Defendant(s))

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) PREMIER PAIN CARE, P.A. d/b/a The Regenerative Spine and Joints Institute

Serve: Registered Agent Carlos J. Garcia

2435 West Oak Street, Suite 103

Denton, TX 76201

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff's attorney,

whose name and address are: Joel B. Rothman

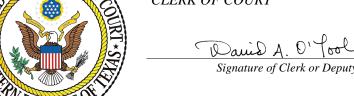
Schneider Rothman Intellectual Property Law Group, PLLC

4651 North Federal Highway Boca Raton, FL 33431 561.404.4350 - Telephone joel.rothman@sriplaw.com

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: **8/10/17**



Civil Action No. 4:17-cv-00554

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

	This summons for (nan	ne of individual and title, if a	my)		
was rec	eeived by me on (date)				
	☐ I personally served the summons on the individual at (place)				
	_		on (date)	; or	
	☐ I left the summons at the individual's residence or usual place of abode with (name)				
	, a person of suitable age and discretion who resides there,				
	on (date), and mailed a copy to the individual's last known address; or \[\sum \] I served the summons on (name of individual)				
	designated by law to accept service of process on behalf of (name of organization)				
			on (date)	; or	
	☐ I returned the sum	se	; or		
	☐ Other (<i>specify</i>):				
	My fees are \$	for travel and	\$ for services, for a total of \$	0.00	
	I declare under penalty of perjury that this information is true.				
Date:		-	Server's signature		
		-	Printed name and title		
		-	Server's address		

Additional information regarding attempted service, etc:

Print Save As... Reset